

**FAYETTE COUNTY E.T.S.B.
911 ADDRESS APPLICATION**

DATE: _____

LAST NAME: _____

FIRST NAME: _____

MIDDLE INITIAL: _____

BUSINESS OR CORPORATION: _____

STREET ADDRESS: _____

CITY: _____

IL: Y / N ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____

INFORMATION NEEDED FOR NEW ADDRESS

Parcel Identification Number (PIN) _____

Former Property Owner _____

Current Property Owner _____

Road Number _____

Road Number of Nearest Intersecting Road _____

What side of the road is the address on?

☐ North ☐ South ☐ East ☐ West

Can the Building be seen from the Road?

☐ Yes ☐ No

G.P.S. Coordinates:

What type of structure is this?

☐ Home ☐ Mobile/Modular Home ☐ Clubhouse ☐ Business ☐ Office ☐ Tower ☐ Farm
☐ Other (Please Describe Below)

This structure is.... (Choose One)

☐ Planned, not under construction. ☐ Under Construction ☐ Existing

Will the structure share a driveway with another structure? ☐ Yes ☐ No

If your structure shares a driveway with another structure, what is the existing structures address?

If you are standing in front of your new building looking toward the road:

The nearest address to your left is: _____

The nearest address to your right is: _____

The nearest address across the road is: _____

Comments or other helpful information:

SIGNATURE OF APPLICANT

Requirements and other information

1. The drive **MUST** be clearly marked before your address request will be processed.
2. If you don't know the PIN number for the property, you can obtain it from The Supervisor of Assessments office at the Fayette County Courthouse. You can reach their office by calling 618-283-5020
3. Please complete this form completely and verify that all the information you have provided is correct to the best of your knowledge.
4. Please allow up to ten (10) working days to complete the request.
5. After all requirements have been met and the address request form has been processed, a confirmation letter will be sent to the address you provided under your current information.
6. You can Email this form to fayettecountyil911@gmail.com. Subject: New Address Request
7. You can fax this form to:
Vandalia Police Dept. Attn. Kevin Jenne 911 Coordinator, 618-283-9281

If you have any questions, please call 618-283-7241, email fayettecountyil911@gmail.com, or visit our office at Vandalia Public Safety Bldg. 221 South Fifth, Vandalia IL